

<i>SERFF Tracking Number:</i>	<i>CCGN-125680554</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Life Insurance Company of North America</i>	<i>State Tracking Number:</i>	<i>39190</i>
<i>Company Tracking Number:</i>	<i>08-5001AR</i>		
<i>TOI:</i>	<i>H14G Group Health - Hospital Indemnity</i>	<i>Sub-TOI:</i>	<i>H14G.000 Health - Hospital Indemnity</i>
<i>Product Name:</i>	<i>Nurse-At-Home Benefit</i>		
<i>Project Name/Number:</i>	<i>Nurse-At-Home Benefit Filing/08-5001AR</i>		

Filing at a Glance

Company: Life Insurance Company of North America

Product Name: Nurse-At-Home Benefit	SERFF Tr Num: CCGN-125680554	State: ArkansasLH
TOI: H14G Group Health - Hospital Indemnity	SERFF Status: Closed	State Tr Num: 39190
Sub-TOI: H14G.000 Health - Hospital Indemnity	Co Tr Num: 08-5001AR	State Status: FEES PAID
Filing Type: Form	Co Status:	Reviewer(s): Rosalind Minor
	Author: Carolyn Caldwell	Disposition Date: 06/09/2008
	Date Submitted: 06/04/2008	Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name: Nurse-At-Home Benefit Filing	Status of Filing in Domicile: Not Filed
Project Number: 08-5001AR	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments: NA
Explanation for Combination/Other:	Market Type: Group
Submission Type: New Submission	Group Market Size: Small and Large
Overall Rate Impact:	Group Market Type: Employer
Filing Status Changed: 06/09/2008	
State Status Changed: 06/04/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
Submission of revised Nurse-At -Home Benefit rider XX-604864-PO for review and approval.	

Company and Contact

Filing Contact Information

Carolyn Caldwell, Compliance Operations	carolyn.caldwell@cigna.com
Analyst	

SERFF Tracking Number: CCGN-125680554 State: Arkansas
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Company Tracking Number: 08-5001AR
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Product Name: Nurse-At-Home Benefit
Project Name/Number: Nurse-At-Home Benefit Filing/08-5001AR

1601 Chestnut Street (215) 761-8529 [Phone]
Philadelphia, PA 19192 (215) 761-5609[FAX]

Filing Company Information

Life Insurance Company of North America CoCode: 65498 State of Domicile: Pennsylvania
1601 Chestnut Street Group Code: 901 Company Type:
TL16D
Philadelphia, PA 19192 Group Name: State ID Number:
(215) 761-8442 ext. [Phone] FEIN Number: 23-1503749

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Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	Fee calculated based on state's requirement.
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Life Insurance Company of North America	\$50.00	06/04/2008	20657750

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	06/09/2008	06/09/2008

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Disposition

Disposition Date: 06/09/2008

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>CCGN-125680554</i>	<i>State:</i>	<i>Arkansas</i>
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Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	Filing Letter	Approved-Closed	Yes
Form	Nurse-At-Home Benefit	Approved-Closed	Yes

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Form Schedule

Lead Form Number: XX-604864-PO

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-	XX-	Application/	Nurse-At-Home	Initial			RevisedNurse
Closed	604864-PO	Enrollment	Benefit				at Home
		Form					Benefit Rider
							Policy.pdf

NURSE-AT-HOME BENEFIT RIDER

This rider is attached to and made a part of the group policy. This rider is subject to the terms, conditions and provisions contained in the policy.

Coverage under this rider begins on the effective date shown on the Policy Schedule, provided premiums are paid when due.

BENEFIT

If, while coverage under this rider is in force, the Insured or the Insured's Covered Dependent requires the services of a nurse during a stay at home after a period of confinement for which Hospital Confinement Benefits were paid, we will pay [\$25.00] **[for each 8 hour shift performed while the nurse is employed, for up to a total of three 8 hour shifts per day]**. The maximum amount payable for any one day will not exceed [\$75.00]. This benefit is subject to the following conditions:

- a) The nurse must be employed under the direction of the attending physician; and
- b) services must begin within [5 days] after the prior period of confinement.


Benefits shall be payable up to the number of days of the prior period of confinement not to exceed **[365 days]**.

DEFINITIONS

"Nurse" means a graduate Registered Nurse (R.N.), Licensed Practical Nurse (L.P.N.), or Licensed Vocational Nurse (L.V.N.). Nurse does not include the Insured or the Insured's spouse; or the Insured's or the Insured's spouse's child, parent, brother, sister; or a person living with the Insured.

This rider terminates at the same time as the policy to which it is attached unless terminated at an earlier date. Except for the above, the rider does not change the policy in any way.

LIFE INSURANCE COMPANY OF NORTH AMERICA



Michael W. Bell, President

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Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number:	CCGN-125680554	State:	Arkansas
Filing Company:	Life Insurance Company of North America	State Tracking Number:	39190
Company Tracking Number:	08-5001AR		
TOI:	H14G Group Health - Hospital Indemnity	Sub-TOI:	H14G.000 Health - Hospital Indemnity
Product Name:	Nurse-At-Home Benefit		
Project Name/Number:	Nurse-At-Home Benefit Filing/08-5001AR		

Supporting Document Schedules

Satisfied -Name:	Certification/Notice	Review Status:	Approved-Closed	06/09/2008
Comments:				
Attachment:				
HIP Nurse At Home Benefit Actuarial Memorandum1.pdf				

Bypassed -Name:	Application	Review Status:	Approved-Closed	06/09/2008
Bypass Reason:	NA			
Comments:				

Satisfied -Name:	Filing Letter	Review Status:	Approved-Closed	06/09/2008
Comments:				
Attachment:				
AR- filing Letter.pdf				

Life Insurance Company of North America

Actuarial Rate Memorandum

Group Hospital Indemnity Insurance Policy

Amendatory Benefit Rider
Policy Form XX-604852

Actuarial Certification

To the best of my knowledge and judgment this amendatory benefit rider, to be attached to the Group Hospital Indemnity Insurance Policy, Policy Form XX-604852, is in compliance with the applicable laws and regulations of this state and premiums are reasonable in relation to the benefit provided and the rates are not excessive, inadequate, or unfairly discriminatory.

A handwritten signature in dark ink, appearing to read "Tim Moran", is written over a light gray rectangular background. To the right of the signature is a thin vertical line.

Tim Moran, ASA, MAAA
Actuarial Manager
April 16, 2008

Amendatory Rider Benefits
Nurse At Home Benefits

Benefit Description

This benefit provides for an amount equal to \$25 per 8-hour shift up to 3 shifts per day in the event that the insured or the insured's covered dependent requires the services of a nurse during a stay at home following a hospital stay in which base benefits were paid. This benefit is payable for up to the number of days of the prior hospital confinement, not to exceed 365 days. Services must begin within 5 days after the prior period of confinement.

Claim Cost Development

Company data and the *M&R Health Cost Guidelines* were used to derive the net annual claim costs for this benefit rider. If a benefit other than \$25 is desired then the net claim costs are adjusted proportionately. The female rates differ if a Maternity Benefits Rider is purchased along with this rider.

Average Length of Stay (1)				X	Avg Daily Benefit (2)	X	Nurse At Home Incidence (3)	=	Claim Costs w/o Maternity Rider			
Age	Male	Female	Unisex				Male	Female	Unisex	Male	Female	Unisex
15-19	4.95	4.82	4.88		\$50.00		0.016	0.021	0.018	3.89	5.06	4.49
20-24	5.62	5.19	5.41		\$50.00		0.016	0.021	0.018	4.43	5.45	4.97
25-29	5.87	5.53	5.70		\$50.00		0.018	0.030	0.024	5.14	8.23	6.73
30-34	6.33	6.05	6.19		\$50.00		0.021	0.037	0.029	6.65	11.12	8.94
35-39	6.73	6.49	6.61		\$50.00		0.028	0.046	0.037	9.42	14.76	12.15
40-44	7.22	6.86	7.04		\$50.00		0.032	0.058	0.045	11.37	19.81	15.71
45-49	7.53	7.30	7.42		\$50.00		0.039	0.065	0.052	14.50	23.63	19.14
50-54	7.86	7.80	7.83		\$50.00		0.042	0.070	0.056	16.51	27.30	21.92
55-59	8.30	8.13	8.22		\$50.00		0.067	0.079	0.073	27.60	32.01	29.83
60-64	8.75	8.66	8.71		\$50.00		0.065	0.112	0.088	28.33	48.50	38.47
65-69	10.61	10.59	10.60		\$50.00		0.051	0.065	0.058	26.92	34.29	30.61
70-74	10.82	10.77	10.80		\$50.00		0.088	0.088	0.088	47.34	47.12	47.23
75-79	11.28	11.26	11.27		\$50.00		0.140	0.140	0.140	78.96	78.82	78.89
child(ren)	4.79	4.79	4.79		\$100.00		0.021	0.021	0.021	10.06	10.06	10.06

Notes:

- (1) Benefits are paid up to the number of days hospitalized. Does not include maternity days.
 (2) Assuming \$25 per shift with an average of 2 shifts per day; 2 children per family
 (3) Based on M&R Health Cost Guidelines; Includes 1.75 Antiselection Factor

Amendatory Rider Benefits
Nurse At Home Benefits

	Average Length of Stay (4)	X	Avg Daily Benefit (5)	X	Nurse At Home Incidence (6)	=	Claim Costs w/ Maternity Rider
<u>Age</u>	<u>Female</u>				<u>Female</u>		<u>Female</u>
15-19	0.052		\$50.00		0.400		6.10
20-24	0.098		\$50.00		0.400		7.41
25-29	0.148		\$50.00		0.400		11.19
30-34	0.102		\$50.00		0.400		13.16
35-39	0.030		\$50.00		0.400		15.36
40-44	0.006		\$50.00		0.400		19.93
45-49	0.001		\$50.00		0.400		23.65
50-54	0.000		\$50.00		0.400		27.30
55-59	0.000		\$50.00		0.400		32.01
60-64	0.000		\$50.00		0.400		48.50
65-69	0.000		\$50.00		0.400		34.29
70-74	0.000		\$50.00		0.400		47.12
75-79	0.000		\$50.00		0.400		78.82
child(ren)	0.001		\$100.00		0.400		10.10

Notes:

(4) Maternity Days = maternity incidence x avg # days inpatient x age adjustment factor;

(5) Assuming \$25 per shift with an average of 2 shifts per day; 2 children per family

(6) Based on M&R Health Cost Guidelines; 2.00 anti-selection factor

The factors in the table below are then applied for Maximum Benefit Periods other than 365 Days. The table was developed utilizing inpatient Length of Stay (LOS) data obtained from the 2005 National Hospital Discharge Survey data.

<u>Age</u>	<u>7 Days</u>	<u>10 Days</u>	<u>14 Days</u>	<u>31 Days</u>
15-19	0.58	0.66	0.73	0.86
20-24	0.72	0.78	0.84	0.93
25-29	0.71	0.77	0.83	0.94
30-34	0.70	0.77	0.83	0.95
35-39	0.64	0.73	0.80	0.92
40-44	0.53	0.65	0.73	0.90
45-49	0.50	0.61	0.72	0.89
50-54	0.51	0.64	0.74	0.92
55-59	0.51	0.63	0.74	0.90
60-64	0.49	0.62	0.72	0.88
65-69	0.50	0.62	0.73	0.91
70-74	0.48	0.63	0.75	0.94

June 4, 2008



CIGNA Group Insurance
Life • Accident • Disability

TL16D
1601 Chestnut Street
Philadelphia, PA 19192
Telephone 215-761-8529
Facsimile 215-761-5609
Carolyn. Caldwell@cigna.com

ATT: Commissioner Julie Benafield Bowman
Arkansas Insurance Department
Life and Health Filings
1200 West 3rd Street
Little Rock, Arkansas 72201-1904

Re: Life Insurance Company of North America

NAIC #: 0901 – 65498

FEI Number: 23-1503749

Group Accident Insurance

Company ID#: Amended Nurse-
At Home Benefit Rider

#08-5001AR

SERFF FILING #:CCGN-
125680554

Nurse-At-Home-Benefit Rider (XX-604864-PO)

Dear Commissioner Bowman:

Attached please find the above revised captioned form for your review and approval. This form is not intended to replace any other form currently approved by your department. This form has not been filed with our state of domicile since Pennsylvania does not require the filing of forms intended for delivery outside their state pursuant to PA Notices 96-1 and/or 96-13.

Our intent is to expand the duration of the benefit by placing brackets highlighted in the Benefits section of the form. The original version of this form was previously approved by your department April 4, 1995, with intent for use with Hospital Indemnity form XX-604852, et al.

We appreciate you taking the time to review this form and trust that you will find everything in order. If you should have any questions or require additional information, please do not hesitate to e-mail me at Carolyn.Caldwell@cigna.com or call me collect at 215.761.8529.

Very truly yours,

Carolyn Caldwell